United States Senator Dianne Feinstein



Nomination Application Packet for the
United States Service Academies
Classes Entering 2008

APPLICANT QUALIFICATIONS:

- be a United States citizen and legal resident of California;
- be at least 17 years old, but not older than 23 on July 1 of the year you enter the academy;
- have a high school education or the equivalent;
- high academic standing;
- participate in extracurricular and/or community activities which demonstrate leadership qualities;
- have received competitive scores on the Scholastic Aptitude Test (SAT) or the American College Testing exam (ACT) .

APPLICATION INSTRUCTIONS:

To be considered for a nomination to one of the United States Service Academies by Senator Feinstein, you are required to submit a complete application packet to Senator Feinstein's San Francisco office no later than November 1, 2007. The following information must be gathered together into **ONE** large envelope as a **SINGLE APPLICATION PACKET** and **POSTMARKED** no later than **NOVEMBER 1, 2007**. Applications postmarked after this date will NOT be considered. If you have further questions, please feel free to call (415) 393-0707.

- 1. Competed Application Form, typed.
- 2. Completed page of extracurricular activities, typed. Attach additional pages if necessary.
- 3. One page essay stating reasons for seeking this nomination, typed in 12 pt. font and double spaced.
- 4. A small photograph or snapshot with your name on the back.
- 5. Official copy of your high school transcript, <u>including</u> courses currently in progress, GPA, and class rank sealed with signature across the flap.
- 6. Official copy of your college transcript (if applicable), <u>including</u> courses currently in progress and GPA sealed with signature across the flap.
- 7. Completed "Counselor/Principal Evaluation Form" sealed with signature across the flap.
- 8. Completed "Teacher/Coach Evaluation Form" from a teacher or coach, sealed with signature across the flap.

Items 7 and 8 are the only recommendations which will be accepted. Please do not request any additional recommendations to be sent on your behalf as they will not be considered.

- 9. Xeroxed copy of your official SAT or ACT report, if the report is not being sent directly from the SAT or ACT Board. To have scores reported directly to Senator Feinstein's office, use the following codes:
 - SAT: 4962
 - ACT: 7110
- 10. A self-addressed stamped post card with written message indicating you would like to be notified when your application is received. <u>Due to the high volume of applications</u>, please do not call to verify receipt of your application.

Send the above information by November 1, 2007, to:

Senator Dianne Feinstein Attn: Military Academy Nomination 1 Post Street, Suite 2450 San Francisco, CA 94104

** If you have not already done so, you need to begin a pre-candidate file with each academy in which you plan to apply. Please note that the material you supply our office is separate from what you will be asked to supply the academies or any other Congressional office.

Full Legal Name:							
La	ust	First	Middle		Social Security Number		
Address:							
		Street			County		
	City		Zip C	Gode	Email Address		
	Home Phone (with area code)				Mobile Phone		
Date &	Place of Birth		Age	Gender	Height	Weight	
How long have you be	en a resident o	of California?	Yea	rs I	Months		
Father or Guardian's Name				Dayt	ime Phone		
Mother or Guardian's Name				Dayti	me Phone		
Name of High School:				Date	of Graduation:	,	
G.P.A:	Your Rank:		nk:	out o	out of		
Highest SAT Score	Reading	Math	Writing				
Highest ACT Score	 English	Math		Indic test d	ate future ates		
English Math College Currently Attending (if applicable)				Coll	lege G.P.A.		
I have also	applied to the follon	ving sources for a nomi	ination:				
Name of Member of C	Congress:			O	f the	_ District	
Senator Boxer	Vice-Presid	dent	President _	JF	ROTC	_	
Are either of	your parents a	active, retired, o If yes	r disable milit , name of bra	•			
Circle preference for n I hereby state that the informa am a U.S. citizen and a legal re	ition contained in t	his application is corr				chant Marine by if appointed. I	
SIGNATURE:	· DATE:						

Extracurricular, Athletic, and Employment Information

NAME:	SOC.SEC.#
LIST SPECIAL AWARDS AND HONORS with	dates of year awarded:
LIST ALL SCHOOL ATHLETICS (note Captain,	Jr.Varsity Letter, Varsity Letter, MVP, All-League, etc.) with dates:
LIST OUT-OF-SCHOOL RECREATIONAL AT	HLETICS, with dates:
LIST SCHOOL AND OUT-OF-SCHOOL CLUB POSITIONS AND HONORS RECEIVED, with	B MEMBERSHIP AND ACTIVITIES <u>NOTING LEADERSHIP</u> dates:
LIST EMPLOYMENT, noting dates and hours pe	r week:
LIST VOLUNTEER INVOLVEMENT, noting de	ates and hours per week:

Application for Nomination to the United States Service Academies TEACHER/COACH EVALUATION FORM

NAME OF APPLICANT:				
Last		First	Middle	
1. How long have you known the applican	nt and in what connection	>		
2. What do you feel are the applicant's tal-	ents and/or strengths?			
2. What do you rect are the applicant 5 tar	cents and, or strengths.			
3. What do you consider to be the weakned	esses of the applicant?			
4. How would you describe his/her ability	y to get along with others?			
5. How would you describe his/her leader	rehip characteristics			
5. 110w would you describe his/her leade.	Iship characteristics:			
6. How does the applicant handle stressfu	al situations?			
7. Do you know of any personal circumst	tances which might affect t	he applicant's	performance at the academy?	
8. Please rank this applicant among his/ho	er peer group to the hest	of vour obser	vation:	
Excellent, among the best I l		n your observ	auon.	
Very Good, stands out in pe				
Average Below Average				
GENERAL COMMENTS, EVALUATION, and/or RECOMMENDATION:				
PRINT OR TYPE TITLE				
PRINT OR TYPE NAME	I your signature written acros	OATEss the flap and	return to the applicant. Please do	

not mail this completed form separately.

Application for Nomination to the United States Service Academies COUNSELOR/PRINCIPAL EVALUATION FORM

NAME OF APPLICAN	Г:				
NAME AND ADDRESS	Last			First	Middle
					SCHOOL TELEPHONE
Junior Class Rank	out of	_ #of students	GPA_		_
Highest SAT Score: Critical	Reading	(Date) N	Math (I	Date)) Writing (Date)
1. How long have you kn	own the app	licant and in what o	connection?		
2. What do you feel are the	ne applicant's	s talents and/or str	engths?		
3. What do you consider	to be the we	aknesses of the app	olicant?		
4. How would you descri	be his/her al	oility to get along w	vith others?		
5. How would you descri	be his/her le	adership characteri	stics?		
6. How does the applicar	it handle stre	ssful situations?			
7. Do you know of any p	ersonal circu	mstances which mi	ight affect the a	applicant's	performance at the academy?
8. Please rank this applica	ant among hi	s/her peer group, t	to the best of y	our observ	vation:
Excellent, a Very Good, Average Below Aver	stands out in	st I have known n peer group			
GENERAL COMMEN	ΓS, EVALU	ATION, and/or RI	ECOMMEND	ATION:	
PRINT OR TYPE TI	ГLЕ			_SIGNA	TURE
PRINT OR TYPE NA				_ DATE_	

^{**}Please place in a sealed envelope with your signature written across the flap and return to the applicant. Please do not mail this completed form separately.